



HAND, FOOT AND MOUTH DISEASE (Coxsackie Virus A)

What is HAND, FOOT AND MOUTH DISEASE?

Hand, Foot, and Mouth Disease (HFMD), a common illness of infants and children, is characterized by fever, sores in the mouth, and a rash with blisters. HFMD begins with a mild fever, poor appetite, malaise ("feeling sick"), and frequently a sore throat. One or two days after the fever begins, sores develop in the mouth, first as small red spots that blister and then becoming ulcers. The sores are usually located on the tongue, gums and inside the cheeks. The skin rash develops over one to two days with flat or raised red spots, some with blisters. The rash does not itch. Most often, it is located on the palms of the hands and soles of the feet; however, it can appear on the buttocks. An person with HFMD may have only the rash or the mouth ulcers.

Is HFMD the same as foot-and-mouth disease?

No. HFMD is a different disease than foot-and-mouth disease of cattle, sheep, and swine.

Is HFMD serious?

Usually not. HFMD is a mild disease and most patients recover without medical treatment in seven to 10 days.

Is HFMD contagious?

Yes, HFMD is moderately contagious. Infection spreads from person to person by direct contact with nose and throat discharges or the stool of infected persons. Infected persons are most contagious during their first week of illness. HFMD is not transmitted to or from pets or other animals.

How soon will someone become ill after being infected?

The usual period from infection to onset of symptoms is three to seven days. Fever is often the first symptom.

Who is at risk for HFMD?

HFMD occurs mainly in children under 10 years old, but everyone can get HFMD. Infection results in immunity to the specific virus, but a second episode may occur following infection with a different member of the enterovirus group. Most infections occur in the summer or early fall.

How is HFMD diagnosed?

Usually the physician can distinguish between HFMD and other causes of mouth sores based on the age of the patient, the pattern of symptoms reported by patient or parent, and the appearance of the rash and sores. A throat swab or stool specimen may be sent to a laboratory to determine which enterovirus caused the illness. Since testing takes two to four weeks, physicians usually do not order these tests.

How can HFMD be prevented?

Prevent HFMD by frequently washing hands, especially after diaper changes; and by washing soiled clothing. Also, disinfect contaminated surfaces with household cleaners (such as diluted bleach solution made by mixing one capful of household bleach containing chlorine with one gallon of water). Children are often excluded from childcare programs, schools, or other group settings during the first few days of the illness. These measures may reduce the spread of infection, but they will not completely interrupt it, because some persons excreting the virus show no symptoms.

How is HFMD treated?

There is no specific treatment available. Symptomatic treatment provides relief from fever, aches, or pain from the mouth ulcers.